

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		19	228 01
FORMALITY REVIEW	BZ	TC3-883	03-12-01
RESPONSE FORMALITY REVIEW	CH	845	5/23/01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 (Through numeral)... Canceled A Appeal
 - Restricted O Objected

Claim	Date
Final Original	
1	01
2	0
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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